

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO.

10748166

FILING DATE

12-31-03

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7	1					
8	1					
9		4				
10		3				
11		8				
12		4				
13		3				
14		3				
15		4				
16	1					
17		1				
18	1					
19		4				
20		1				
21	1					
22	1					
23	1					
24	1					
25	1					
26	1					
27	1					
28		7				
29		8				
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48						
49						
50						
TOTAL IND.	17					
TOTAL DEP.		50				
TOTAL CLAIMS	67					

	IND	DEP	IND	DEP	IND	DEP
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						